

DHS 145 - Applicant Data Sheet

STATE OF HAWAII - DEPARTMENT OF HUMAN SERVICES

1. _____
Position Title

2. _____
Division

3. _____
Date

4. _____
NAME: First Middle Last

5. _____
PHONE: Home / Other

6. _____
MAILING ADDRESS: Number Street City Zip Code Island

7. _____
E-MAIL ADDRESS

8. EDUCATION: _____
Name of last grade school attended (elementary, intermediate or high school) Highest grade completed

Did you graduate? ☐ YES ☐ NO Did you receive a GED? ☐ YES ☐ NO

In-service training; Business or Trade school; Armed Forces training; College, University, or Professional Schools, etc.				
Name and Address of School(s)	Course or Major field of Study	No. of Credits Completed		Kind of Degree, Certificate, Diploma Received
		Sem.	Qtr.	

9. LICENSES, CERTIFICATES, OTHER QUALIFICATIONS (Including Driver's License): Indicate the kind of license, registration number, and the State or other Licensing Authority:

A. **Driver's License:** ☐ Yes, I have a valid driver's license and/or I am able to obtain a valid driver's license by the time of appointment.
☐ No, I do not have a driver's license and/or I am not interested in being considered for positions which require a driver's license.

B. **Other Licenses or Certificates:** Please indicate the kind of license, registration number, and the State or other Licensing Authority. If proof of evidence is required, please submit a photocopy or present for verification.

